This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

SA1-2E Short Form

Return completed workbook by email to:

coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCO	DUNTING PERIOD COVERED E	BY THIS STATEMENT: (YYY)	//(Period))	
		2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
			Barcode Data Filing Period (optional - se	ee instructions)	
Accounting Period					
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co		<pre>v of another corporation, give the full corpo</pre>	orate title
Owner		List any other name or names under which	n the owner conducts the business of the ca	ble system.	
		If there were different owners during the a single statement of account and royalty fer			omit a
		Check here if this is the system's first filing	g. If not, enter the system's ID number assig	ned by the Licensing Division.	2410
		LEGAL NAME OF OWNER/MAILING Central Telcom Services LLC	ADDRESS OF CABLE SYSTEM		
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
		MAILING ADDRESS OF OWNER OF (CABLE SYSTEM		
		(Number, street, rural route, apartment, or suite no Fairview, Ut 84629-0007	umber)		
		(City, town, state, zip)			
С		RUCTIONS: In line 1, give any busin already appear in space B. In line 2			
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTEM	:		
	2	(Number, street, rural route, apartment, or suite n	umber)		
		(City, town, state, zip code)			
Privacy Act Notice	: Section	111 of title 17 of the United States Code au	thorizes the Copyright Offce to collect the pe	ersonally identifying information (PII) requester	ed on this

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

1-27-21

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
Name	Central Telcom Services LLC	241
Aroa	Instructions: List each separate community served by the cable system. A "comm "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that yo as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobi	unity" is the same as a "community unit" as defined in FCC rule communities within unincorporated areas and including single u list will serve as a form of system identification hereafter know
Served	identified city.	
	CITY OR TOWN	STATE
First	Wendover	Utah
Community	West Wendover	Nevada
dd Rows as Necessary		

	<u></u>							FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SYS	
	Central Telcom Service	s LLC							241
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCR	IBERS AND R	ATES				
E	In General: The information in s	•		•		•			
Secondary	system, that is, the retransmissi about other services (including)								
Transmission	last day of the accounting period	. , ,						sting on the	
Service: Sub-	Number of Subscribers: Bot	•					-		
scribers and	down by categories of secondar	•		•		•			
Rates	each category by counting the n separately for the particular serv		-	•••		•	-	s charged	
	Rate: Give the standard rate of							rge and the	
	unit in which it is generally billed	· · ·		,		ard rate variatior	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block					condary transmi	ssion sorv	vice that cable	
	systems most commonly provid			-		•			
	that applies to your system. Not								
	categories, that person or entity						• •		
	subscriber who pays extra for ca first set" and would be counted of						nder "Serv	rice to the	
	Block 2: If your cable system	•			• • •		e different	from those	
	printed in block 1 (for example,	-							
	with the number of subscribers a	and rates, in th	e right-l	hand block. A t	wo- or thre	ee-word descrip	tion of the	service is	
	sufficient.	JCK 1		T			BLOCK	< 2	
		NO. OF		DATE	CAT			NO. OF SUBSCRIBERS	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	VICE	SUBSCRIBERS	RAT
	Service to first set		124	32.95	Expand	hed		105	60.
	Service to additional set(s)			52.55	Expan	404		100	
	• FM radio (if separate rate)								
	Motel, hotel		199	32.95				199	60.
	Commercial								
	Converter							304	-
	Residential								
	 Non-residential 								
	SERVICES OTHER THAN SEC				e				•
_	In General: Space F calls for ra					all your cable sy	stem's ser	vices that were	
F	not covered in space E, that is,	those services	that are	e not offered in	combinat	ion with any sec	ondary tra	Insmission	
•	service for a single fee. There a		-		-			,	
Services Other Than	furnished at cost or (2) services amount of the charge and the u								
Secondary	enter only the letters "PP" in the		dodding	, omou, n'arry i				siogram baolo,	
ransmissions:	Block 1: Give the standard ra			•					
Rates	Block 2: List any services tha listed in block 1 and for which a				-	-	•		
	brief (two- or three-word) description		-						
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RAT
	Continuing Services:			ation: Non-res					
	• Pay cable	17.95	• Mo	tel, hotel		Varies			
		16.95	• Co	mmercial		-			
	 Pay cable—add'l channel 		• Pay	y cable		-			
	 Pay cable—add'I channel Fire protection 	-	1 1 4						
	Fire protectionBurglar protection	-	-	y cable-add'l ch	nannel	-			
	Fire protection	- - -	• Pay • Fire	e protection		-			
	 Fire protection Burglar protection Installation: Residential First set 	- - 100.00	• Pay • Fire • Bui	e protection rglar protection					
	 Fire protection Burglar protection Installation: Residential First set Additional set(s) 	- - -	• Pay • Fire • Bui Other	e protection rglar protection services:		- - 			
	 Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	- - 100.00	• Pay • Fire • Bui Other • Re	e protection rglar protection services: connect		- - - 29.95			
	 Fire protection Burglar protection Installation: Residential First set Additional set(s) 	- - 100.00	• Pay • Fire • Bui • Bui • Ree • Dis	e protection rglar protection services: connect connect		-			
	 Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	- - 100.00	• Pay • Fire • Bui • Bui • Rei • Dis • Ou	e protection rglar protection services: connect		- - 29.95 - 49.95 29.95			

	1			A. / A = = = 1
ne	LEGAL NAME OF OWNER OF			SYSTEM
	Central Telcom Servio			24
	PRIMARY TRANSMITTERS:			
ary hitters: ision	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, a Substitute Basis Stations basis under specific FCC ru	entify every television station (including m during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations of ules, regulations, or authorizations: e in space G—but do list it in space I (in a substitute basis.	t (1) stations carried only on a part-tin the carriage of certain network progra 61(e)(2) and (4))]; and (2) certain stat carried by your cable system on a sub	me basis under ms [sections ions carried on a ostitute program
	basis. For further information	also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination I	, see page (v) of the general instructi	ons.
	multicast stream associated	d with a station according to its over-th		-
		el number the FCC assigned to the tele	evision station for broadcasting over t	the air in its community
	Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	(RC is channel 4 in Washington, D.C. a case whether the station is a network ering the letter "N" (for network), "N-M" , "E" (for noncommercial educational), erms, see page (iv) of the general instr in of each station. For U.S. stations, lis dian stations, if any, give the name of t	(for network multicast), "I" (for indepe or "E-M" (for noncommercial education fuctions in the paper SA1-2 form. In the community to which the station	endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	κυτν	2	Ν	Salt Lake City, Utah
	•••••••••••••••••••••••••••••••••••••••			
	ктух	4	Ν	Salt Lake City, Utah
lecessary	KTVX KSL	4 5	N N	
lecessary				Salt Lake City, Utah
ecessary	KSL	5	Ν	Salt Lake City, Utah Salt Lake City, Utah
lecessary	KSL KUED	5 7	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah
ecessary	KSL KUED KUEN	5 7 9	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah
lecessary	KSL KUED KUEN KSTU	5 7 9 13	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah
Necessary	KSL KUED KUEN KSTU KJZZ	5 7 9 13 14	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
: Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah
Necessary	KSL KUED KUEN KSTU KJZZ KUPX	5 7 9 13 14 16	N E	Salt Lake City, Utah Salt Lake City, Utah Salt Lake City, Utah Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah

LEGAL NAME OF								SYSTEM I 24
	every radio s	station ca	arried on a separate and discr nerally receivable by your cab					Н
The ceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If signal, indicate Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be rece it the Co sign of the static ion's sig g a chec n's locati	I-Band FM Carriage: Under O stem whenever it is received a ived at the headend, with the opyright Office regulations on the each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	at the system's he system's FM anter this point, see pa sed by the cable s he station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st eneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
UNEL UIUN		0,0				0,0		
						·		
						·		
						·		
						·		

Accounting Perio	od: 2020/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Central Telcom Servic	es LLC						2410
	SUBSTITUTE CARRIAGE	E: SPECIA		NT AND PROGRAM LOO	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ify every no. ccounting p	nnetwork televi eriod, under sp	sion program, broadcast by ecific present and former F	a <i>distant</i> sta CC rules, regi	ulations, or au	uthorization	s. For a further
Carriage:	1. SPECIAL STATEMEN	-						
Special	 During the accounting per 				sis anv nonr	network telev	ision produ	ram
Statement and	broadcast by a distant sta							
Program Log	bioaucast by a distant sta						YES	× NO
	Note: If your answer is "No	", leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comple	te the prog	Iram
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subs		•		s wherever p	ossible, if the	eir meaning	g is
	clear. If you need more spa Column 1: Give the title			vision program ("substitute	e program") t	hat during th	ne account	ina
	period, was broadcast by a							
	under certain FCC rules, re	gulations, d	or authorization	ns. See page (v) of the ger	neral instruct	ions for furth	er informa	tion.
	Do not use general categor		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I L	ove Lucy"	or
		m was broa		er "Yes." Otherwise enter '				
		•		asting the substitute progr he community to which the		rensed by th	e FCC or	in
	the case of Mexican or Car		,			•		
	Column 5: Give the mor	nth and day		stem carried the substitute		,	with the n	nonth
	first. Example: for May 7 give							
	to the nearest five minutes.			ogram was carried by your				ately
	stated as "6:00–6:30 p.m."	Example.	a program can	led by a system norm 6.01	. 15 p.m. to 6	.20.30 p.m.		
		er "R" if the	listed program	n was substituted for prog	ramming that	t your system	n was <i>requ</i>	iired
	to delete under FCC rules a	and regulati	ions in effect d	uring the accounting perio	d; enter the l	etter "P" if th	e listed pro	
	was substituted for program		your system w	as permitted to delete und	ler FCC rules	and regulat	ions in	
	effect on October 19, 1976							
			E PROGRAM			N SUBSTIT AGE OCCU		7. REASON FOR
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6. TI		DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM –	- то	
							-	
							-	
							-	
						_	-	
							-	
							-	
							-	
					·- 		-	·
							-	
							-	
						_	-	

NI	LEGAL NAME OF OWNER OF CABLE SYSTEM:			9	
Name	Central Telcom Services LLC			5	241
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file an all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanation page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s)	ystem's sec on of how to	condary transm compute this a	ission service amount, see	0.000.00
	during the accounting period IMPORTANT: You must complete a statement in space P concerning gross re-			\$ 16 (Amount of gr	9,239.30 oss receipts)
L Copyright Royalty Fee	 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 k Use block 3 if the amount of gross receipts in space K is more than \$263,800 k See page (vi) of the general instructions located in the paper SA1-2 form for more in 	out less thar		263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137	7,100 OR L	ESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	fee that you	must pay for th	iis six-month	
	Line 1. Royalty fee for accounting period				
					0.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lin	nes 1 and 2 .			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but mo	re than \$137,1	100)	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K		169,239.30		
	3. Subtract line 2 from line 1	-	94,560.70		
	4. Enter the amount of gross receipts from space K	-		169,239.30	
	5. Enter the amount from line 3	-		94,560.70	
	 6. Subtract line 5 from line 4	-		74,678.60 ¢	373.39
	8. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
					0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7	and 8		\$	373.39
			and then CEOZ		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	,800 (but le	ess than \$527	,600)	
		· · · ·		,600)	
	1. Enter the amount of gross receipts from space K			,600)	
	1. Enter the amount of gross receipts from space K 2. Base amount under statutory formula			,600)	
	1. Enter the amount of gross receipts from space K 2. Base amount under statutory formula 3. Subtract line 2 from line 1	\$	263,800.00		
	 Enter the amount of gross receipts from space K	\$	263,800.00		
	1. Enter the amount of gross receipts from space K 2. Base amount under statutory formula 3. Subtract line 2 from line 1	\$ 	263,800.00		
	 Enter the amount of gross receipts from space K	\$ 	263,800.00 \$	1,319.00	
	 Enter the amount of gross receipts from space K	\$	263,800.00 \$	1,319.00	
	 Enter the amount of gross receipts from space K	\$	263,800.00 \$	1,319.00	
-	 Enter the amount of gross receipts from space K	\$ 	263,800.00 \$	1,319.00	
Filing Fee and Fotal Remittance Due	1. Enter the amount of gross receipts from space K	\$ 	263,800.00 \$	1,319.00	
Total Remittance	 Enter the amount of gross receipts from space K	\$ 	263,800.00 \$ \$ \$ \$	<u>1,319.00</u> 0.00 373.39	393.39

Accounting Period:	2020/2		FORM SA1-2E. PAGE 7.
Name		DWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Central Telcon	n Services LLC	2410
M Channels	to its subscribers	bu must give (1) the number of channels on which the cable system carried television broadcast stations s, and (2) the cable system's total number of activated channels during the accounting period.	9
	system carried	television broadcast stations	9
	on which the ca	I number of activated channels able system carried television broadcast stations cast services	248
N Individual to Be Contacted		BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Paul Peckham Telephone (435) 4	27-0561
	Address	P.O. Box 7	
	Email	(Number, street, rural route, apartment, or suite number) Fairview, Utah 84629 (City, town, state, zip) p.peckham@centracom.com Fax (optional) (435) 427-3200	
O Certification		(This statement of account must be certified and signed in accordance with Copyright Office regulations) ed, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Owne	er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
		t of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as line 1 of space B and that the owner is not a corporation or partnership; or	identified
		er or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the line 1 of space B.	cable system
		d the statement of account and hereby declare under penalty of law that all statements of fact contained herein e, and correct to the best of my knowledge, information, and belief, and are made in good faith. on 1001(1986)]	

X /s/ Eddie L. Cox
Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)
Typed or printed name: Eddie L. Cox
Title: (Title of official position held in corporation or partnership)
Date: 1/1/2021

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

unting Period: 2020/2	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
tral Telcom Services LLC	241
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? NO 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	-
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
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For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
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For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.